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TREASURE STATE HEALTH

Vol. XVI, No. 4. OFFICIAL BULLETIN — STATE BOARD OF HEALTH, HELENA, MONTANA OCTOBER, 1966.

Clinic Established in Missoula to Diagnose and Evaluate Mental Retardation

The State Board of Health, working with the Missoula City-County Health Department, has established a clinic in Missoula to diagnose and evaluate the mentally retarded and to provide a training ground for professional persons to work in the field of mental retardation. The training aspect of the project is in cooperation with the departments of psychology and sociology at the University in Missoula, Mary E. Soules, M.D., M.P.H., the project director has announced.

This clinic was established in an effort to fulfill one of the recommendations of the State Committee for Mental Retardation Planning. This Committee assisted by committees in each of the State's 56 counties, found the greatest need in providing for the retarded to be adequate diagnostic and evaluation facilities for both children and adults. The State Board of Health has a diagnostic facility for the mentally retarded in connection with the Center for Cerebral Palsy and Handicapped Children. However, because of the lack of staff this clinic is presently operating on a limited basis—one day a month and accepting only those children who are under five years, seven months of age. It is expected that this clinic will be enlarged at some future time so that more persons in Eastern Montana can be provided these services.

Procedure

The Missoula clinic is administered by Kenneth J. Lampert, M.D., M.P.H., the Missoula City-County Health officer, who is also a pediatrician. Suspected retardates may be referred to the clinic by physicians, school personnel, parents, public health nurses and welfare workers. They will be seen on an appointment basis. It is anticipated the clinic will serve Western Montana primarily, but cases can be accepted from other areas of the State as staff time permits. It is anticipated that a "screening" evaluation clinic will be carried out in some of the communities outside Missoula by the Clinic staff and where necessary, the retardate will then be referred into Missoula if more complete diagnostic and evaluation techniques are needed.

The pediatrician will take the person's history and give him a complete physical examination. Laboratory tests and x-ray procedures will be carried out and consultation from other medical specialists will be arranged when necessary.

Psychological, speech and hearing tests will be administered. Sociological study, public health nursing services and counseling will be included. Then the over-all evaluation and recommendations will be made by the complete team. With comprehensive diagnosis and evaluation, the families will be aided in planning so that their retardates will be able to attain their potential.

The University of Montana has a doctoral program in both psychology and sociology. The psychology program is directed by John Watkins, Ph.D., and the sociology program by Gordon Browder, Ph.D. Some of the personnel that Montana needs and has difficulty in recruiting is being trained at this institution, but the students have had to leave the state for field training and do not return. The Clinic will provide the opportunity for field training and it is expected some of them will accept positions in the State.

The clinic is housed in the Missoula City-County health department which has recently moved to the new annex of the Missoula County Courthouse. The Pine Street entrance is the most convenient to room 305 on the third floor where the clinic's receiving desk is located. The phone number is 549-6413.

The Image of Public Health

No. 15

Mrs. Fern M. Symes*, Great Falls President, Montana Public Health Association

"Public Health is People" was the title of a book published some years ago and is still very pertinent today; Public Health is the people who use public health services, the people in communities who establish and provide for support of public health programs and the people included in over thirty different disciplines of public health workers who deliver those services. The membership of the Montana Public Health Association is composed of many various professional persons and interested lay groups and individuals who are working to-

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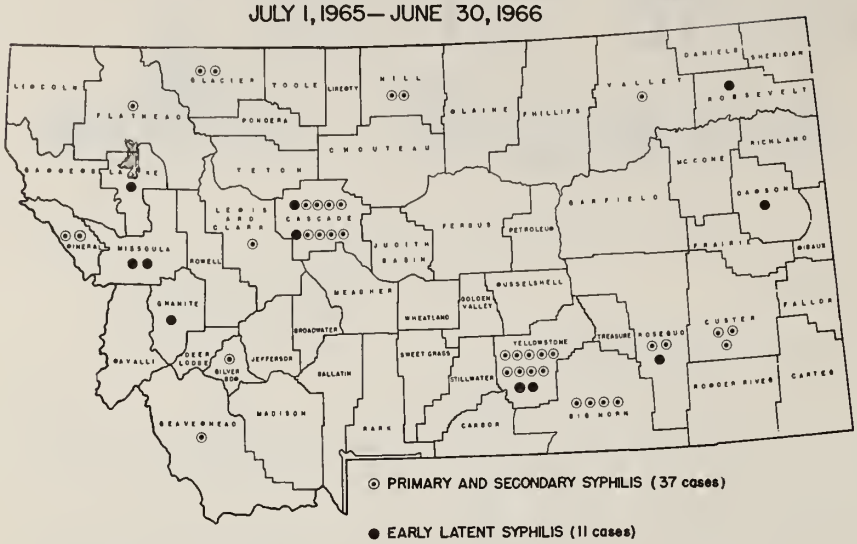
*Mrs. Symes, associate nursing supervisor in the Cascade City-County Health Department, has been on that staff since 1943. She graduated from the Montana Deaconess Hospital School of Nursing and had training as a laboratory technician. For six years before going into public health nursing, she worked as a registered medical technologist. Her education in public health nursing was earned at the Universities of Minnesota and Washington.

VENEREAL DISEASE IN MONTANA

REPORTED CASES OF EARLY SYPHILIS IN MONTANA, JULY 1, 1965—JUNE 30, 1966



There were thirty-seven cases of primary and secondary syphilis reported to the State Board of Health from July 1, 1965, through June 30, 1966. Eleven cases of early latent syphilis were reported for the period as well as 93 cases of late latent syphilis. Five hundred and eighteen cases of gonorrhea were also reported during the same period.

The number of cases of infectious syphilis shows an increase over comparable periods for two previous years. The number of cases of early latent and late latent syphilis for each of the two years is higher than for the year July 1, 1965, to June 30, 1966. This may indicate that increasing numbers of infectious syphilis cases are being seen earlier and are being reported by Montana physicians.

The spirochete which causes syphilis usually enters the body through the skin in or around the sexual organs or the mouth. The first sign of infection—the chancre—appears at at this site usually between 10 and 90 days after exposure. This is called the **PRIMARY** stage of syphilis.

From 3 to 6 weeks later, a rash usually appears. It may be generalized or localized, or even insignificantly sparse and scattered. Sores may appear in the mouth or other moist areas. Sore throat, fever, or headache may develop. Hair may fall out in patches. Such symptoms may disappear and reoccur over a period of a year or possibly two; but when they are present the disease is said to be in the **SECONDARY** stage.

Lesions of both the primary and secondary stages are highly infectious. After the secondary stage is past, the disease passes to **LATENT** and **LATE** stages, when it is dangerous to the infected person, but is not infectious to others except through childbirth, when a baby may be infected with congenital syphilis by a mother with latent syphilis. Early latent syphilis is syphilis of less than four years duration.

Geographic Distribution

The geographic distribution of the cases of primary, secondary, and latent syphilis cases reported for the period is statewide. The accompanying map shows this distribution, with concentration in Cascade and Yellowstone counties. One interesting aspect of the cases of early syphilis reported during the period is that of age of the patient. Infectious syphilis patients reported ranged from 8 years of age to 59 years old. This gives some indication that more education about venereal disease is necessary and should begin as early as possible. Other young people were also involved, either infected with syphilis or as contacts of infected persons.

The 518 cases of gonorrhea are more than reported during the previous one year period. It is generally agreed that only a fraction of the cases of gonorrhea is ever reported. Many infected persons, particularly women, are never seen by physicians and thus never diagnosed and reported as infected with gonorrhea.

An intensive veneral disease control program, such as is being conducted in Montana, takes several years to show its over-all effect. Increased reporting of early syphilis

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THE IMAGE OF PUBLIC HEALTH

(Continued from page 1)

gether to promote public health in Montana. It started out as a small group in 1908 and now has a membership of nearly 150 persons. As a member of the Confederation of Western Affiliates of the American Public Health Association, it serves as Montana's voice in regional public health affairs and derives certain advantages from that relationship.

Since we are always concerned with the growth of knowledge and keeping abreast of trends and new developments in the field of Public Health, one of the very real benefits derived as an affiliate of Western Branch has been the participation in a program of continuing education. It is sponsored jointly by the Schools of Public Health, University of California at Berkeley and Los Angeles and the University of Hawaii and the various state associations and State Boards of Health. Topics covered in these very fine seminars, held twice yearly in Montana, have included Interpersonal Relationships, Mental Health, Family Planning, Mental Retardation, Public Health Administration. Planned for the coming year are Seminars on the Human Factors in Public Health and Environmental Health. While the primary target has been full time professional public health workers, professionals in allied fields as well as other interested persons involved in public health programs are included.

While much of the business of the association is carried on during the year by an executive committee, the membership meets annually and it has been the custom at that time to give recognition to individuals or groups who have given long years of service, done an outstanding service, or both, in the field of Public Health.

The impact of recent Federal Health and Welfare legislation will no doubt bring many new workers into the field and it is hoped that they soon will align themselves with the organization of the people who are dedicated to the welfare and advancement of the profession.

Almost a quarter of a century ago I attended my first meeting of the Montana Public Health Association and looking back on that experience I realize now what must have been true then that this organization is not divided into sections of professional disciplines since we work as a team why not meet as a team.

Work Experience Program for High School Students in Special Education Classes

This is the third and last article in this bulletin in the series, "Employment of the Retarded."

The School Work-Experience Program which is relatively new in Montana High Schools is a new concept in education for high school special education students. In this program, for a part of the day, the community becomes the classroom for observation and experience in the world of work.

A teacher-counselor assigned by the school district works with the students in the academic setting of the classroom for one half of the day. The curriculum is based on the needs of the students and the subjects. Mathematics, science, social studies, art, and others, are designed to help the student learn about his abilities and develop social adequacies to take his place in community living.

The other half of the student's day is spent in the community classroom, which is a place of business where the operator is interested in helping him become acquainted with, and experienced in, various job situations.

Only two high schools in Montana presently provide the School Work-Experience Program. They are Billings and Helena. However, other high schools are working toward establishing such a program.

The good cooperation and working relationships with business establishments provides opportunity for students to have a variety of experience. The student is assigned to a particular job for a certain period of time. His or her, abilities and skills are then evaluated to determine his adaptability for his work; and then he or she, is given experience in another work situation. This helps the students to find the type of work for which they are best suited.

Experience has been provided in such businesses as motels, restaurants, furniture stores, upholstering shops, libraries, garages, nursery schools and kindergartens, egg producers, green houses and kennels where part of the work was assisting in training dogs.

Cooperation between the school and the Division of Vocational Rehabilitation is an important factor in this program. The teacher-counselor works closely with the Division in the evaluation of students as to their adaptation to certain job possibilities. All students are required to have a medical examination and to carry school insurance. There must also be a reasonable expectation that the student will go on to gainful employment.

Parents are expected to provide any necessary items for their children taking this course just as with any other course in the school curriculum. However, financial assistance is available to students through the Division of Vocational Rehabilitation if this is necessary for the student to participate in the Work-Experience Program. This can be in the form of costs of transportation, uniforms required, necessary tools, clothing, or physical restoration such as glasses, dental work, or correction of conditions that would limit the student in terms of skills required on the job.

Close supervision is given by the teacher-counselor while the students are on the job. The teacher-counselor also works closely with each employer. It is the responsibility of the teacher-counselor to make original contacts to employers to find work situations where the students can receive training.

After the students are out of the school program, the Division of Vocational Rehabilitation takes over their supervision for a period of time if this is necessary. It has been the experience in the program in Montana that most of the students require very little supervision after they complete the work-experience program.

New Visual Aids

"Cigarettes and Health" is the title of a film strip with an accompanying record that has been added to the SBH film library. It points out the harmfulness of cigarette smoking and emphasizes the effects on emphysema, lung cancer, and heart disease. It was prepared for teachers and others interested in education.

"Handle With Care" is the title of a new 16mm movie film which points out there is hope for many of the mentally retarded if they are "handled with care". The film brings out the importance of team work among professional workers.

The need for parent understanding is illustrated as are the importance of training, periodic testing and the need for employment.

Nursery schools provide a Good Learning Experience for some Special Education Students.

New Executive Named to Mental Health Association

The Montana Association for Mental Health has employed Mr. Robert T. Reed as the executive director. He replaces Mrs. Ann Needham, Anaconda, who has retired. The Association has moved its office from Anaconda to Helena. The new office is at 301 N. Raleigh.

Mr. Reed received his B.A. degree from the College of Idaho at Caldwell. He came to Montana from Casper, Wyoming, where he operated his own public relations and advertising agency. He has had experience in voluntary health associations, having been employed in the Idaho Heart Association, assigned to the southern district and he held the post of executive director for Wyoming and northern Colorado for the National Foundation.

Coming Events . . . .

Oct. 12-13—Montana Nurses' Association, Missoula.

Oct. 17-21—Montana Sanitarians' Conference, Bozeman.

Oct. 21-Nov. 4—American Public Health Association, San Francisco.

Nov. 3-4—Montana Dietetic Association, Bozeman.

Dietary Handbook Revised

A revised edition of "The Dietary Handbook for Small Hospitals and Extended Care Facilities in Montana" has been published by the State Board of Health. It was prepared by a committee of the Montana Dietetic Association and edited by Mrs. Dorothea Davis, nutrition consultant on the Board's staff. It has been endorsed by the Montana Medical Association.

The handbook includes not only a section on house diets and modified diets but also chapters on menu planning, food buying, preparation and storage, needs and problems of the geriatric patient, and references for the dietary department. A complimentary copy has been made available to each health facility which is licensed for hospital or long-term care. Additional copies of the complete handbook are available from the State Board of Health for $2.00. The price of the diet section is $1.00.

Native Montanan Honored

Jessie M. Bierman, M.D., M.P.H., a native of Kalispell, was awarded an honorary Doctor of Law degree from the University of California Medical School at Berkeley, in June. Dr. Bierman served as the director of Maternal and Child Health in the Montana State Board of Health in 1935 and 1936, before joining the Children's Bureau.

She spent the greater part of her career as a professor of Maternal and Child Health in the University of California's School of Public Health at Berkeley from which she retired a few years ago. She is still active in public health affairs, with her main activity as the director of the MCH research unit at the School.

Dr. Bierman has built a summer home at Goose Bay on the west side of Flathead Lake near the ranch where she grew up.

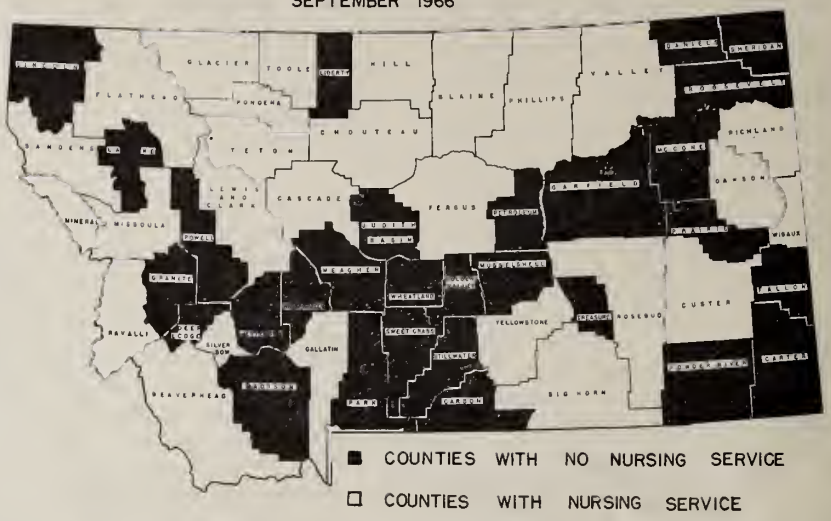
VENEREAL DISEASE

(Continued from page 2)

and gonorrhea is one indication of the effectiveness of the control program. The increasing awareness of the problem of venereal diseases by students, parents, teachers, and the community in general gives some evidence that both the professional and community education efforts are having their effect. These efforts provide the keystones to an effective venereal disease control effort.

STATUS OF NURSING SERVICE IN MONTANA

SEPTEMBER 1966



Staff Needs In Providing Home Health Care Services

At a meeting of the recently formed Advisory Committee to the Board's Division of Nursing, Mrs. Virginia Kenyon said it is estimated there are 7,000 persons over 65 years of age that are apt to need "Home Health Services" in any one year. Mrs. Kenyon is the director of the Board's Division of Nursing which is responsible for administering the "Home Health Service" portion of medicare.

The problem she presented to the advisory committee at its last meeting is: "What can be done to provide these services in the 29 counties of the State where there is now no public health nursing service?" These 29 counties have 123,500 persons or 18% of the State's population. They are shown on the map above.

Mrs. Kenyon said medicare can be expected to pay for 50-60% of the cost of the nursing service. A preliminary study made in Ravalli County where out-of-hospital nursing services have been provided for the past four years shows that it has cost $7.14 per nursing visit in that county.

To stimulate communities, find nurses to provide the services and supervise them there is a need for funds for district nursing supervisors. Mrs. Kenyon envisions seven districts in the State. To date there are supervisory positions filled in three districts with headquarters in Missoula, Butte and Miles City. These positions are financed by Federal funds granted to the State Board of Health. There is an urgent need to provide supervisors in the other four districts. The estimated cost of supervisory services which include salaries, secretarial services, travel and office expense is $12,500 for each district.

Certified Agencies

Miss Paula Jank, nursing consultant on Mrs. Kenyon's staff, said to date there are six certified agencies in Mineral, Missoula, Ravalli, Cascade, Lewis & Clark counties and in the Southwestern District covering six counties with headquarters in Butte. They provide home health services in areas with a population totaling 171,000 or 25% of the State's population. Agencies expected to be certified this fall are in Gallatin and Richland, Wibaux and Dawson Counties, which have a population of 50,560 persons, 7½% of the State's population.

Flathead and Yellowstone Counties are in the early planning stages and when they are certified, one-half of the population will be served.

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